

Service Company Permit Application Checklist

Type of Application		<input type="checkbox"/> New <input type="checkbox"/> Renewal			
Name of Service Company					AZ #
DBA Name of Service Company, if applicable					
Name of analyst			Date application received	Date review completed	
Application Decision		<input type="checkbox"/> Approve <input type="checkbox"/> Deny (reason for denial):			
Decided by:			Decision date:	Communication date:	
	Requirement	Statute	N/A	Meets	Fails
1	\$300 fee	R20-6-407(C)(2)(d) & (G)(1)			
2	Application Form E-800 & E-811	R20-6-407(C) & (G)(1)			
a.	SECTION A: Applicant holds an ACC Certificate of Good Standing and the name exactly matches ACC record (http://ecorp.azcc.gov/Search)	R20-6-407(C) & (G)(1)			
b.	ALL: Every question on the application is answered	R20-6-407(C) & (G)(1)			
c.	SECTION F: The affidavit/attestation is complete and is signed by officer(s) of the applicant.	R20-6-407(C)(1)(g)			
d.	SECTION D, Item 2: If YES, explanation and documentation enclosed				
e.	SECTION E, Item 4: Number of biographical affidavits provided match the reported count	R20-6-407(C)(2)(e)			
f.	Each biographical affidavit is fully completed, and information is consistent with NAIC RIRS/SAD and other information sources.				
g.	For each biographical affidavit with a YES answer to a background question (NAIC Form 11, Item 11), application includes a copy of the complaint and the filed adjudication/settlement for each matter.				

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	Requirement	Statute	N/A	Meets	Fails
3	Financial statements as of the most recent fiscal year end	R20-6-407(C)(2) & (G)(1)			
a.	Financial statements have been certified by officer(s) of the applicant				
b.	Net Income – Current Income Statement <input type="checkbox"/> = SECTION C, Item 1		\$		
c.	Applicant provided non-consolidated GAAP balance sheets for the two preceding years				
d.	Current Assets – Current Balance Sheet <input type="checkbox"/> = SECTION C, Item 2		\$		
e.	Current Liabilities – Current Balance Sheet <input type="checkbox"/> = SECTION C, Item 3		\$		
f.	Working Capital – Current Balance Sheet <input type="checkbox"/> = SECTION C, Item 4		\$		
g.	Owner’s Equity – Current Balance Sheet <input type="checkbox"/> = SECTION C, Item 5		\$		
h.	If the net income, working capital or owner/stockholder equity is negative, applicant included mitigation explanation				
4	Trust deposit by <input type="checkbox"/> Surety bond <input type="checkbox"/> Marketable securities <input type="checkbox"/> MR/CL Insurance policy				
a.	\$100,000 <input type="checkbox"/> = SECTION E, Item 2	20-1095.04	\$100,000		
b.	Amount of trust deposit (must be at least Line 4a)		\$		
c.	For a surety bond (may include individual bonds or schedule or blanket forms of bonds):	NAIC# _____ of AZ-authorized insurer <input type="checkbox"/> Yes <input type="checkbox"/> No Form E-857 <input type="checkbox"/> Yes <input type="checkbox"/> No Attorney-in-Fact			
d.	For a marketable security:	<input type="checkbox"/> Yes <input type="checkbox"/> No Custody Agreement <input type="checkbox"/> Yes <input type="checkbox"/> No Form E125			
e.	For a mechanical reimbursement (contractual liability) insurance policy:	<input type="checkbox"/> Yes <input type="checkbox"/> No Copy of policy <input type="checkbox"/> Yes <input type="checkbox"/> No In force confirmation			